



## Application Data Sheet

### Application Information

Application number:: 10/718,504  
Filing Date:: November 19, 2003  
Application Type:: Regular  
Subject Matter:: Utility  
Suggested classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R??::  
Number of CD disks::  
Number of copies of CDs::  
Sequence Submission::  
Computer Readable Form (CRF)?::  
Number of copies of CRF::  
Title:: EXPANSILE DEVICE FOR USE IN BLOOD  
VESSELS AND TRACTS IN THE BODY AND  
METHOD  
Attorney Docket Number:: 021872-001010US  
Request for Early Publication:: No  
Request for Non-Publication:: No  
Suggested Drawing Figure:: 11E  
Total Drawing Sheets:: 7  
Small Entity?:: Yes  
Latin name::  
Variety denomination name::  
Petition included?:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers One::

Secrecy Order in Parent Appl.: No

**Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Gordon  
Middle Name:: H.  
Family Name:: Epstein  
Name Suffix::  
City of Residence:: Fremont  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 135 Kootenai Drive  
City of Mailing Address:: Fremont  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94539

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Todd  
Middle Name:: E.  
Family Name:: Lempert  
Name Suffix::  
City of Residence:: Piedmont  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 244 Scenic Avenue  
City of Mailing Address:: Piedmont

State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94611

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Brian  
Middle Name:: B.  
Family Name:: Martin  
Name Suffix::  
City of Residence:: Boulder Creek  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 315 Alder Drive  
City of Mailing Address:: Boulder Creek  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 95006

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: David  
Middle Name:: M.  
Family Name:: Taylor  
Name Suffix::  
City of Residence:: ~~Fremont~~ Lake Forest  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: ~~38396 Redwood Terrace~~ 22341 Kirkwood

City of Mailing Address:: ~~Fremont~~ Lake Forest  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: ~~94536~~ 92630

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Richard  
Middle Name:: M.  
Family Name:: Romley  
Name Suffix::  
City of Residence:: Alameda  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 1205 Benton Street, Apt. 1  
City of Mailing Address:: Alameda  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94501

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Zia  
Middle Name::  
Family Name:: Yassinzadeh  
Name Suffix::  
City of Residence:: San Jose  
State or Province of Residence:: CA  
Country of Residence:: US

Street of Mailing Address:: 11240 Mt. Hamilton Rd.  
City of Mailing Address:: San Jose  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 95140

Applicant Authority Type:: Inventor  
Primary Citizenship Country:: US  
Status:: Full Capacity  
Given Name:: Glenn  
Middle Name::  
Family Name:: Foy

Name Suffix::  
City of Residence:: Pleasanton  
State or Province of Residence:: CA  
Country of Residence:: US  
Street of Mailing Address:: 7824 Foothill Knolls Drive  
City of Mailing Address:: Pleasanton  
State or Province of mailing address:: CA  
Country of mailing address:: US  
Postal or Zip Code of mailing address:: 94588

### **Correspondence Information**

Correspondence Customer Number:: 20350

### **Representative Information**

Representative Customer Number:: 20350

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation-in-part of	10/272,508	10/15/02
10/272,508	Continuation	09/528,574	03/20/00
09/528,574	Continuation-in-part of	09/241,680	02/01/99
09/241,680	Continuation-in-part of	08/972,383	11/18/97
08/972,383	Continuation-in-part of	08/798,870	02/11/97

**Foreign Priority Information**

Country::	Application number::	Filing Date::
-----------	----------------------	---------------

**Assignee Information**

Assignee Name::	<u>Cardiva Medical, Inc.</u>
Street of mailing address::	<u>2585 Leghorn Street</u>
City of mailing address::	<u>Mountain View</u>
State or Province of mailing address::	<u>CA</u>
Country of mailing address::	<u>US</u>
Postal or Zip Code of mailing address::	<u>94043</u>